

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 752847

**Entity Name:** SUGAR BEACH TOWNHOME OWNERS' ASSOCIATION, INC.

**FILED**  
**Feb 23, 2015**  
**Secretary of State**  
**CC0631454742**

**Current Principal Place of Business:**

8443 GULF BLVD. #D-18  
NAVARRE BEACH, FL 32566

**Current Mailing Address:**

8443 GULF BLVD. #D-18  
NAVARRE BEACH, FL 32566

**FEI Number: 59-2130592**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WASYLIK, LOUIS A.  
343 LULA BELLE LANE  
FT. WALTON BEACH FL 32548 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title VP  
Name MARTIN, SYLVIA  
Address 6509 RIVIERE DR.  
City-State-Zip: PELL CITY AL

Title P  
Name STUDEBAKER, ANTHONY  
Address 2525 CHIMNEY RIDGE DR  
City-State-Zip: CONYERS GA 30102

Title DS  
Name WEIDLICH, H. EDWARD JR  
Address 338 MAIN ST  
City-State-Zip: BAY ST LOUIS MS 39520

Title D  
Name WASYLIK, LOUIS  
Address 343 LULA BELLE LANE  
City-State-Zip: FT WALTON BCH FL 32548

Title TREASURER, DIRECTOR  
Name NICHOLS, KATHY F  
Address 465 LOKEY LANE  
City-State-Zip: WILSONVILLE AL 35186

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: LOUIS A. WASYLIK**

**DIRECTOR**

**02/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date